

PAYMENT NO 1 28 568096 J
 PAYMENT AMOUNT \$14,797.16
 ISSUE DATE 09-25-2023
 AUTHORIZED BY CAMPBELL, VIRGINIA
 PHONE (855) 341-8184

CLAIM NO 52-50L3-37R
 LOSS DATE 05-27-2023
 POLICY NO 3596-894-52A
 INSURED TANTILLO, SALVATORE &

PURE INSURANCE
 PO BOX 3068
 BLOOMINGTON IL 61702-3068

REMARKS arb award # NY-030-394

COVERAGE DESCRIPTION
 PROPERTY DAMAGE LIABILITY

ON BEHALF OF
 LYNCH, SUSAN

AMOUNT
 14,797.16

RETAIN STUB FOR RECORDS



STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY

DEFENSIVE SUBROGATION AND

DEFENSIVE SUBROG PAGECNTQ.P74

JPMORGAN CHASE BANK, NA 56-1544/441
 COLUMBUS, OH

1 28 568096 J

CLAIM NO 52-50L3-37R
 LOSS DATE 05-27-2023

INSURED TANTILLO, SALVATORE &

DATE 09-25-2023
 MM DD YYYY

OCT 02 2023 ZC

*****EXACTLY
 FOURTEEN THOUSAND SEVEN HUNDRED NINETY-SEVEN AND 16/100 DOLLARS

\$*****14,797.16

Pay to the
 Order of: PURE INSURANCE, AS SUBROGEE OF SUSAN LYNCH

2915614-04

Michael J. Lynn
 AUTHORIZED SIGNATURE
John C. Farney
 AUTHORIZED SIGNATURE

MUST BE ENDORSED BY ALL PAYEES

This Notice Only Applies to Vendors and Service Providers:

By endorsing this payment for your services, you agree not to use or disclose any personal customer information received from us unless necessary for the services we requested.

120-4582.1 10-07-2013